

DIPE  
MAY 05 2003

# PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail Box ISSUE FEE**  
**Commissioner for Patents**  
**Washington, D.C. 20231**  
**Fax (703)746-4000**

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**CURRENT CORRESPONDENCE ADDRESS** (Note: Legibly mark-up with any corrections or use Block 1)

7590

02/04/2003

Gary S Engelson  
Wolf Greenfield & Sacks PC  
600 Atlantic Avenue  
Boston, MA 02210-2211

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

(Depositor's name)

(Signature)

(Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/532,837      | 03/21/2000  | William T. Clark     | M0506/7021          | 7155             |

**TITLE OF INVENTION:** ENHANCED DATA CABLE WITH CROSS-TWIST CABLED CORE PROFILE

| APPLN. TYPE    | SMALL ENTITY | ISSUE FEE      | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE   |
|----------------|--------------|----------------|-----------------|------------------|------------|
| nonprovisional | NO           | \$1300         | \$0             | \$1300           | 05/05/2003 |
| EXAMINER       | ART UNIT     | CLASS-SUBCLASS |                 |                  |            |
| NGUYEN, CHAU N | 2831         | 174-11300C     |                 |                  |            |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Wolf, Greenfield  
2 & Sacks, P.C.  
3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Cable Design Technologies, Inc. Leominster, MA 01455A.

Please check the appropriate assignee category or categories (will not be printed on the patent)

4a. The following fee(s) are enclosed:

☒ Issue Fee

☐ Publication Fee

☐ Advance Order - # of Copies \_\_\_\_\_

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☒ A check in the amount of the fee(s) is enclosed.

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